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Recommendation Summary

Version: D3 - 040 - 2011-13 Final 2013 Sup

Budget Period: 2011-13
Budget Level Criteria: ALL

Dollars in Thousands		Program Priority	Annual Avg FTEs	General Fund State	Other Funds	Total Funds
Program 040 - Div of Developmental Disabilities						
M1 - Mandatory Caseload and Enrollment Changes						
0U	Forecast Cost/Utilization	0	0.0	409	473	882
93	Mandatory Caseload Adjustments	0	0.0	(2,015)	(2,006)	(4,021)
SubTotal M1			0.0	(1,606)	(1,533)	(3,139)
Cumulative Total Thru M1			0.0	(1,606)	(1,533)	(3,139)
M2 - Inflation and Other Rate Changes						
8P	Postage Rate Adjustments	0	0.0	4	2	6
9T	Transfers	0	(1.5)	(389)	(198)	(587)
DA	Utilization of Residential Services	0	0.0	223	(1,183)	(960)
X9	Program Support Stabilization	0	0.0	1,400	800	2,200
XG	SOLA Needs	0	8.7	801	565	1,366
XH	Community Crisis Stabilization	0	9.7	1,132	653	1,785
SubTotal M2			16.8	3,171	639	3,810
Cumulative Total Thru M2			16.8	1,565	(894)	671
Total Proposed Budget for Program			16.8	1,565	(894)	671
040 - Div of Developmental Disabilities						

Recommendation Summary Text

0U - Forecast Cost/Utilization

(M1) The Department of Social and Health Services (DSHS), Division of Developmental Disabilities (DDD), requests \$882,000 Total Funds, \$409,000 GF-State for the 2013 Supplemental Budget to reflect changes in the utilization of personal care services.

8P - Postage Rate Adjustments

(M2) The Department of Social and Health Services (DSHS) requests \$258,000 Total Funds, \$143,000 GF-State, for the 2013 Supplemental Budget for the increase in first class postage from \$0.44 to \$0.45 that took effect January 22, 2012.

93 - Mandatory Caseload Adjustments

(M1) The Department of Social and Health Services (DSHS), Division of Developmental Disabilities (DDD), requests a reduction of (\$4,021,000) Total Funds, (\$2,015,000) GF-State in the 2013 Supplemental Budget to adjust funding for personal care. Personal care services help people with developmental disabilities live in community settings, and whenever possible, to remain in a family environment.

9T - Transfers

(M2) The Department of Social and Health Services (DSHS) requests the shift of FTEs and funding among programs in the 2013 Supplemental Budget. This transfer will align FTEs and funds with the programs where the costs are incurred. The DSHS programs combined total equals a net zero impact cost.

DA - Utilization of Residential Services

(M2) The Department of Social and Health Services (DSHS), Division of Developmental Disabilities (DDD), requests a reduction of (\$960,000) Total Funds and a increase of \$223,000 GF-State in the 2013 Supplemental Budget for utilization of

Recommendation Summary

Budget Period: 2011-13
Budget Level Criteria: ALL

Version: D3 - 040 - 2011-13 Final 2013 Sup

Dollars in Thousands	Program Priority	Annual Avg FTEs	General Fund State	Other Funds	Total Funds
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DA - Utilization of Residential Services

community residential services. Residential services provide instruction and support to people with developmental disabilities in a safe community setting.

X9 - Program Support Stabilization

(M2) The Department of Social & Health Services (DSHS), Division of Developmental Disabilities (DDD), requests \$2,200,000 Total Funds, \$1,400,000 GF-State, in the 2013 Supplemental Budget to stabilize funding for DDD Program Support.

XG - SOLA Needs

(M2) The Department of Social and Health Services (DSHS), Division of Developmental Disabilities (DDD), requests 17.3 FTEs and \$1,366,000 Total Funds, \$801,000 GF-State to create two new State Operated Living Alternative (SOLA) homes for young people, one in the Spokane area and another in the Yakima area.

XH - Community Crisis Stabilization

(M2) The Department of Social and Health Services (DSHS), Division of Developmental Disabilities (DDD), requests 19.3 FTEs and \$1,785,000 Total Funds, \$1,132,000 GF State to operate two community crisis stabilization homes and a mobile statewide treatment team. These services are needed to implement ESSB 5459, passed in the 2011 Legislative Session, which restricts access for children under age 21 to state institutions. The purpose of these services is to provide time limited supports, not to exceed 180 days, to preserve, maintain and strengthen a child's ability to remain in the community with his or her family.

Department of Social and Health Services

DP Code/Title: M1-0U Forecast Cost/Utilization

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Recommendation Summary Text:

The Department of Social and Health Services (DSHS), Division of Developmental Disabilities (DDD), requests \$882,000 Total Funds, \$409,000 GF-State for the 2013 Supplemental Budget to reflect changes in the utilization of personal care services.

Fiscal Detail:

Operating Expenditures

	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040			
001-1 General Fund - Basic Account-State	0	409,000	409,000
001-C General Fund - Basic Account-Medicaid Federal	0	473,000	473,000
Total Cost	0	882,000	882,000

Staffing

Package Description:

DSHS, DDD, requests \$882,000 Total Funds, \$409,000 GF-State for the 2013 Supplemental Budget to reflect changes in the utilization of personal care services.

On average, per capita costs for personal care services within DDD have grown annually by approximately one percent over the past two years. The main drivers for the increase are Adult Family Homes (AFH), Individual Provider (IP), and Agency Provider (AP) services.

Agency Contact: Dan Winkley (360) 902-8179

Program Contact: Carla Mcknight (360) 725-2430

Narrative Justification and Impact Statement

What specific performance outcomes does the agency expect?

Forecast driven caseload changes reflect the agency's goals, including:

- Ensuring a safety net is in place for people of need
- Clients maintain maximum independence
- Services are of high quality
- People participate in choices about their services
- Clients experience stability

Performance Measure Detail

Program: 040

Activity: D074 Personal Care

No measures linked to package

Incremental Changes	
<u>FY 1</u>	<u>FY 2</u>
0.00	0.00

Is this decision package essential to implement a strategy identified in the agency's strategic plan?

This request supports the following goals identified in the DSHS 2011-2013 Strategic Plan:

--Goal 1 Improve the health status of vulnerable populations

Department of Social and Health Services

DP Code/Title: M1-0U Forecast Cost/Utilization
Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

--Goal 3 Improve individual and public safety

Does this decision package provide essential support to one of the Governor's priorities?

This package supports the Governor's priority of strengthening Washington families by protecting and providing for those who can't care for themselves.

Does this decision package make key contributions to statewide results? Would it rate as a high priority in the Priorities of Government process?

This decision package rates as a high priority in the Priorities of Government (POG) process for the 2011-13 Budget development under the strategy:

Provide for the safety of Washington's vulnerable children and adults

--Provide support services to families

--Provide community-based residential and in-home support services

What are the other important connections or impacts related to this proposal?

Funding this decision package will ensure that providers of DDD services will see little change in their method of conducting business with ADSA.

What alternatives were explored by the agency, and why was this alternative chosen?

None

What are the consequences of not funding this package?

This request addresses the forecasted growth of per capita costs for Medicaid clients in DDD. Increased cost for these clients must be recognized. It is possible that reductions in non-mandatory activities may become necessary to cover the cost of growth within mandatory activities.

What is the relationship, if any, to the state's capital budget?

None

What changes would be required to existing statutes, rules, or contracts, in order to implement the change?

None

Expenditure and revenue calculations and assumptions

See attachment: DDD M2-OU Forecast Cost - Utilization.xlsx

Which costs and functions are one-time? Which are ongoing? What are the budget impacts in future biennia?

All costs would be ongoing. Future biennia costs will be adjusted by future caseload and per capita estimates.

<u>Object Detail</u>	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040 Objects			
N Grants, Benefits & Client Services	0	882,000	882,000

Department of Social and Health Services

DP Code/Title: M1-0U Forecast Cost/Utilization

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

DSHS Source Code Detail

Program 040

Fund 001-1, General Fund - Basic Account-State

Sources Title

0011 General Fund State

FY 1

FY 2

Total

0

409,000

409,000

Total for Fund 001-1

0

409,000

409,000

Fund 001-C, General Fund - Basic Account-Medicaid Federal

Sources Title

19TA Title XIX Assistance (FMAP)

0

473,000

473,000

Total for Fund 001-C

0

473,000

473,000

Total Program 040

0

882,000

882,000

2013 Supplemental Budget M1-OU Forecast Cost - Utilization

	<u>Caseload</u>	<u>Expenditures</u>			<u>Per Capitas</u>			<u>Expenditures</u>			<u>Due to Cost/Utilization Changes</u>		
		<u>Total</u>	<u>State</u>	<u>Total</u>	<u>Total</u>	<u>State</u>	<u>Caseload</u>	<u>Total</u>	<u>State</u>	<u>Federal</u>	<u>Total</u>	<u>State</u>	<u>Federal</u>
<i>Funding Available</i>													
Fiscal Year 2013 - Through Policy Level (includes 2012 Supplemental Budget)													
H52 Personal Care	13,480	\$ 273,702,000	\$ 137,142,000	\$ 1,692	\$ 848								
<i>Funding Needed</i>													
Fiscal Year 2013													
H52 Personal Care	13,282	\$ 270,563,000	\$ 135,536,000	\$ 1,698	\$ 850	(198)		\$ 882,000	\$ 409,000	\$ 473,000			
2013 Supplemental Budget								\$ 882,000	\$ 409,000	\$ 473,000			

Department of Social and Health Services

DP Code/Title: M1-93 Mandatory Caseload Adjustments

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Recommendation Summary Text:

The Department of Social and Health Services (DSHS), Division of Developmental Disabilities (DDD), requests a reduction of (\$4,021,000) Total Funds, (\$2,015,000) GF-State in the 2013 Supplemental Budget to adjust funding for personal care. Personal care services help people with developmental disabilities live in community settings, and whenever possible, to remain in a family environment.

Fiscal Detail:

Operating Expenditures

	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040			
001-1 General Fund - Basic Account-State	0	(2,015,000)	(2,015,000)
001-C General Fund - Basic Account-Medicaid Federal	0	(2,006,000)	(2,006,000)
Total Cost	0	(4,021,000)	(4,021,000)

Staffing

Package Description:

DSHS, DDD, requests a reduction of (\$4,021,000) Total Funds, (\$2,015,000) GF-State in the 2013 Supplemental Budget to adjust funding for personal care. Personal care services help people with developmental disabilities live in community settings, and whenever possible, to remain in a family environment.

Personal care refers to assistance with activities of daily living (bathing, eating, toileting, etc.) and is considered an entitlement. Funding has been adjusted based on the June 2012 forecasts by the Caseload Forecast Council (CFC) and the Aging and Disability Services Administration (ADSA).

Agency Contact: Dan Winkley (360) 902-8179
Program Contact: Carla McKnight (360) 725-2430

Narrative Justification and Impact Statement

What specific performance outcomes does the agency expect?

This and other forecast-driven caseload changes reflect several agency goals including:

- A safety net is in place for people of need
- Clients maintain maximum independence
- Services are of high quality
- People participate in choices about their services
- Clients experience stability

Performance Measure Detail

Program: 040

Activity: D074 Personal Care

No measures linked to package

Incremental Changes	
<u>FY 1</u>	<u>FY 2</u>
0.00	0.00

Is this decision package essential to implement a strategy identified in the agency's strategic plan?

Department of Social and Health Services

DP Code/Title: M1-93 Mandatory Caseload Adjustments

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

This request supports the following goals identified in the DSHS 2011-2013 Strategic Plan:

- Goal 1 Improve the health status of vulnerable populations
- Goal 3 Improve individual and public safety

Does this decision package provide essential support to one of the Governor's priorities?

This package supports the Governor's priority of strengthening Washington families by protecting and providing for those who can't care for themselves.

Does this decision package make key contributions to statewide results? Would it rate as a high priority in the Priorities of Government process?

This decision package rates as a high priority in the Priorities of Government (POG) process for the 2011-13 Budget development under the strategy:

- Provide for the safety of Washington's vulnerable children and adults
- Provide support services to families
 - Provide community-based residential and in-home support services

What are the other important connections or impacts related to this proposal?

Failure to adjust personal care, based on the CFC and DSHS forecasts, could increase out-of-home residential services provided by DDD.

What alternatives were explored by the agency, and why was this alternative chosen?

Personal care services are considered an entitlement. No other alternatives were considered.

What are the consequences of not funding this package?

This request addresses the forecasted caseload in DDD.

What is the relationship, if any, to the state's capital budget?

None

What changes would be required to existing statutes, rules, or contracts, in order to implement the change?

None

Expenditure and revenue calculations and assumptions

See attachment: DDD M1-93 Mandatory Caseload.xlsx

Which costs and functions are one-time? Which are ongoing? What are the budget impacts in future biennia?

All costs would be ongoing. Future biennia costs will be adjusted by future caseload and per capita estimates.

Department of Social and Health Services

DP Code/Title: M1-93 Mandatory Caseload Adjustments

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

<u>Object Detail</u>	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040 Objects			
N Grants, Benefits & Client Services	0	(4,021,000)	(4,021,000)

DSHS Source Code Detail

Program 040	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Fund 001-1, General Fund - Basic Account-State			
<u>Sources</u> <u>Title</u>			
0011 General Fund State	0	(2,015,000)	(2,015,000)
<i>Total for Fund 001-1</i>	<u>0</u>	<u>(2,015,000)</u>	<u>(2,015,000)</u>
Fund 001-C, General Fund - Basic Account-Medicaid Federal			
<u>Sources</u> <u>Title</u>			
19TA Title XIX Assistance (FMAP)	0	(2,006,000)	(2,006,000)
<i>Total for Fund 001-C</i>	<u>0</u>	<u>(2,006,000)</u>	<u>(2,006,000)</u>
Total Program 040	<u>0</u>	<u>(4,021,000)</u>	<u>(4,021,000)</u>

2013 Supplemental Budget M1-93 Mandatory Caseload Adjustment

Change in:

Expenditures			Per Capitas			Expenditures		
<u>Caseload</u>	<u>Total</u>		<u>State</u>	<u>Total</u>		<u>Caseload</u>	<u>Total</u>	
Due to Caseload			Due to Caseload			Due to Caseload		

Department of Social and Health Services

DP Code/Title: M2-8P Postage Rate Adjustments
Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Recommendation Summary Text:

The Department of Social and Health Services (DSHS) requests \$258,000 Total Funds, \$143,000 GF-State, for the 2013 Supplemental Budget for the increase in first class postage from \$0.44 to \$0.45 that took effect January 22, 2012.

Fiscal Detail:

<u>Operating Expenditures</u>	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Overall Funding			
001-1 General Fund - Basic Account-State	0	4,000	4,000
001-C General Fund - Basic Account-Medicaid Federal	0	2,000	2,000
Total Cost	0	6,000	6,000

Staffing

Package Description:

Effective January 22, 2012, the United States Postal Service (USPS) increased the rate for first class mail to \$0.45 from the former rate of \$0.44. This request is for \$258,000 (\$143,000 GF State) to fund a 2.27 percent increase in first class postage rate. The department postage costs are to meet mandatory notification requirements and for required operational needs.

Agency Contact: Jialing Huang (360) 902-7831

Narrative Justification and Impact Statement

What specific performance outcomes does the agency expect?

Not applicable

Performance Measure Detail

Agency Level

Activity: D036 Field Services

No measures linked to package

Incremental Changes	
<u>FY 1</u>	<u>FY 2</u>
0.00	0.00

Activity: D079 Program Support for Developmental Disabilities

No measures linked to package

Incremental Changes	
<u>FY 1</u>	<u>FY 2</u>
0.00	0.00

Is this decision package essential to implement a strategy identified in the agency's strategic plan?

This request supports the following goal identified in the DSHS 2011-2013 Strategic Plan:

--Goal 5 Increase public trust through strong management practices that ensure quality and leverage all resources

Does this decision package provide essential support to one of the Governor's priorities?

This package supports the Governor's priority of holding government accountable by focusing on performance and investing our resources to get the greatest possible return.

Department of Social and Health Services

DP Code/Title: M2-8P Postage Rate Adjustments
Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Does this decision package make key contributions to statewide results? Would it rate as a high priority in the Priorities of Government process?

This decision package rates as a high priority in the Priorities of Government (POG) process for the 2011-13 Budget development under the strategy:

Provide for the safety of Washington's vulnerable children and adults
--Ensure efficiency, performance, and accountability to clients and the public

What are the other important connections or impacts related to this proposal?

All state programs are impacted by a USPS rate increase.

What alternatives were explored by the agency, and why was this alternative chosen?

The USPS mail service is considered accessible to all clients and is an efficient means of communication. Other forms of communication or remittance of payments, such as electronic banking and email, are not accessible to many of the department's clients or may require revisions to state laws.

What are the consequences of not funding this package?

Non funding may have negative results to the agency's ability to communicate with clients and remain responsive to constituent needs. If not approved, then funds will have to be diverted from programs or services to cover the increased costs.

What is the relationship, if any, to the state's capital budget?

None

What changes would be required to existing statutes, rules, or contracts, in order to implement the change?

None

Expenditure and revenue calculations and assumptions

Actual costs for Fiscal Year 2012 for specific Object E costs were used as the base for calculating Fiscal Year 2013 increases.

See attachment: AW M2 8P Postage Rate Adjustment.xlsx

Which costs and functions are one-time? Which are ongoing? What are the budget impacts in future biennia?

This item is an ongoing operational cost. There are no one time-costs associated with this request. This is an increase that will carry forward into future biennia.

<u>Object Detail</u>	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Overall Funding			
E Goods And Services	0	5,000	5,000
T Intra-Agency Reimbursements	0	1,000	1,000
Total Objects	0	6,000	6,000

Department of Social and Health Services

DP Code/Title: M2-8P Postage Rate Adjustments

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

DSHS Source Code Detail

Overall Funding

Fund 001-1, General Fund - Basic Account-State

Sources Title

0011 General Fund State

FY 1

FY 2

Total

0

4,000

4,000

Total for Fund 001-1

0

4,000

4,000

Fund 001-C, General Fund - Basic Account-Medicaid Federal

Sources Title

19TA Title XIX Assistance (FMAP)

19UL Title XIX Admin (50%)

0

1,000

1,000

0

1,000

1,000

Total for Fund 001-C

0

2,000

2,000

Total Overall Funding

0

6,000

6,000

**2013 Supplemental Budget
M2-8P Postage Rate Adjustment**

**Department of Social & Health Services
2013 Supplemental Agency Request - 8P Postage Rate Adjustment**

Object Split

Program	Object E				ISSD - Sub Object TZ				Total		
	2012	2013	Total		2012	2013	Total		2012	2013	Total
010	0	14,000	14,000		0	3,000	3,000		0	17,000	17,000
020	0	1,000	1,000		0	1,000	1,000		0	2,000	2,000
030	0	2,000	2,000		0	1,000	1,000		0	3,000	3,000
040	0	5,000	5,000		0	1,000	1,000		0	6,000	6,000
050	0	8,000	8,000		0	2,000	2,000		0	10,000	10,000
060	0	201,000	201,000		0	11,000	11,000		0	212,000	212,000
070	0	0	0		0	0	0		0	0	0
100	0	2,000	2,000		0	0	0		0	2,000	2,000
110	0	4,000	4,000		0	2,000	2,000		0	6,000	6,000
135	0	0	0		0	0	0		0	0	0
145	0	0	0		0	0	0		0	0	0
150	0	21,000	21,000		0	(21,000)	(21,000)		0	0	0
Total	0	258,000	258,000		0	0	0		0	258,000	258,000

State/Other Split

Program	State				Other				Total		
	2012	2013	Total		2012	2013	Total		2012	2013	Total
010	0	11,000	11,000		0	6,000	6,000		0	17,000	17,000
020	0	2,000	2,000		0	0	0		0	2,000	2,000
030	0	3,000	3,000		0	0	0		0	3,000	3,000
040	0	4,000	4,000		0	2,000	2,000		0	6,000	6,000
050	0	6,000	6,000		0	4,000	4,000		0	10,000	10,000
060	0	112,000	112,000		0	100,000	100,000		0	212,000	212,000
070	0	0	0		0	0	0		0	0	0
100	0	0	0		0	2,000	2,000		0	2,000	2,000
110	0	5,000	5,000		0	1,000	1,000		0	6,000	6,000
135	0	0	0		0	0	0		0	0	0
145	0	0	0		0	0	0		0	0	0
150	0	0	0		0	0	0		0	0	0
Total	0	143,000	143,000		0	115,000	115,000		0	258,000	258,000

Department of Social and Health Services

DP Code/Title: M2-9T Transfers

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Recommendation Summary Text:

The Department of Social and Health Services (DSHS) requests the shift of FTEs and funding among programs in the 2013 Supplemental Budget. This transfer will align FTEs and funds with the programs where the costs are incurred. The DSHS programs combined total equals a net zero impact cost.

Fiscal Detail:

Operating Expenditures

	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Overall Funding			
001-1 General Fund - Basic Account-State	0	(389,000)	(389,000)
001-C General Fund - Basic Account-Medicaid Federal	0	(198,000)	(198,000)
Total Cost	0	(587,000)	(587,000)

Staffing

	<u>FY 1</u>	<u>FY 2</u>	<u>Annual Avg</u>
Agency FTEs	0.0	(3.0)	(1.5)

Package Description:

DSHS requests internal transfer among several program budgets resulting in a net zero funding change for the department. This aligns program appropriations with planned expenditures for the current budget. DSHS requests the following adjustments:

Information System Services Division (ISSD) Compensation Adjustment-

(Program 110 to Programs 010, 020, 030, 040, 050, 060, 070, 100, and 135):

Program 110 - Administration and Supporting Services (Administration) will transfer compensation adjustments for staff in program 150 or ISSD to other DSHS programs. ISSD is a \$0 budget and chargeback program where funding resides in the program's TZ budget. Administration will transfer \$130,000 GF-State in reductions to the other programs. The transfer will realign the funding with the correct DSHS programs to be charged by ISSD.

Central Service Reforms Savings Redistribution-

(Program 145 to Programs 010, 020, 030, 040, 050, 060, 070, 100, 110, 135, and 150):

Program 145 - Payments to Other Agencies (PTOA) received a budget reduction from the 2012 Supplemental Budget reducing costs related to cell phones, mailing, printing, and information technology. These costs are not paid by PTOA, but are paid by the other programs. PTOA will transfer \$3,641,000 Total Funds, \$2,781,000 GF-State, in reductions to the programs. This transfer will reduce funding in the programs where cost savings are incurred.

Internal Auditor and Cell Phone Funding-

(Programs 010, 020, 030, 040, 050, 060, 070, 100, 110, and 135):

Internal funding related to auditing and monitoring the effective use of cell phones is created. The funding will monitor cell phone usage and payments and develop a department wide policy for effective use of cell phones. Programs will transfer \$151,000 Total Funds, \$76,000 GF-State, to Administration.

Human Resource Consolidation-

(Programs 010, 020, 030, 040, 050, 060, 070, 100, and 150 to 110):

The Human Resources Division (HRD) within Administration has undergone reorganization. All human resources staff in the field now report to HRD, but are funded by the various programs. This consolidation will move the budget for all human resources staff to HRD. The LEAP Committee provisionally approved this consolidation in June 2012, pending the receipt and verification of recast historical data. Programs will transfer 71.5 FTEs and \$4,647,000 Total Funds, \$2,458,000 GF-State, to Administration.

Evidence-Based Funding Transfer-

Department of Social and Health Services

DP Code/Title: M2-9T Transfers

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

(Program 110 to Programs 010 and 030):

Funding from the 2012 Supplemental Budget - 2nd Special Session was provided for the implementation of E2SHB 2536 - Children Services Delivery with coordination between Children's Administration and Mental Health. The funding is intended for programs 010 and 030. Administration will transfer 2.0 FTEs and \$218,000 Total Funds, \$113,000 GF-State, to Children's and Mental Health.

Special Commitment Center (SCC) and Consolidated Field Services (CFS) FTE Transfer-

(Program 135 - SCC to Program 160 - CFS):

SCC received FTEs and funding for the maintenance operations of McNeil Island and received a reduction in resident's legal defense costs and related FTEs. Costs for these services are in SCC, but FTEs are in CFS. SCC will transfer 3.7 FTEs to CFS (6.7 FTEs provided for maintenance operations and 3.0 FTEs reduced for legal costs).

Cost Allocation Funding Adjustment-

(Program 110 and Program 145)

Actual earnings for Title 19 between Administration and PTOA need to be adjusted. Administration is earning more federal than state and the opposite is true in PTOA. Administration will transfer \$500,000 GF-State to PTOA and PTOA will transfer \$500,000 GF-Federal to Administration. The net effect is zero.

Fair Hearing Coordinator-

(Program 050 to Program 040)

Program 050 was provided 3.0 FTEs for the Fair Hearing Coordinator positions to implement I-1163. However, these positions should be in Program 040. Program 050 transfers 3.0 FTEs to Program 040.

These transfers will realign FTEs and funding with the DSHS programs to be charged.

Agency contact: Tula Habb (360) 902-8182

Narrative Justification and Impact Statement

What specific performance outcomes does the agency expect?

Costs are reflected in appropriate DSHS programs and the department maintains an effective administrative operation.

Performance Measure Detail

Agency Level

Activity: D036 Field Services

No measures linked to package

Incremental Changes

<u>FY 1</u>	<u>FY 2</u>
0.00	0.00

Activity: D079 Program Support for Developmental Disabilities

No measures linked to package

Incremental Changes

<u>FY 1</u>	<u>FY 2</u>
0.00	0.00

Activity: D086 Residential Habilitation Facilities

No measures linked to package

Incremental Changes

<u>FY 1</u>	<u>FY 2</u>
0.00	0.00

Is this decision package essential to implement a strategy identified in the agency's strategic plan?

This request supports the following goals identified in the DSHS 2011-2013 Strategic Plan:

--Goal 5 Increase public trust through strong management practices that ensure quality and leverage all resources

Department of Social and Health Services

DP Code/Title: M2-9T Transfers

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Does this decision package provide essential support to one of the Governor's priorities?

This package supports the Governor's priority of holding government accountable by focusing on performance and investing our resources to get the greatest possible return.

Does this decision package make key contributions to statewide results? Would it rate as a high priority in the Priorities of Government process?

This decision package rates as a high priority in the Priorities of Government (POG) process for the 2011-13 Budget development under the strategy:

State government must achieve results through efficient and effective performance.
--Ensure efficiency, performance, and accountability to the public

What are the other important connections or impacts related to this proposal?

None

What alternatives were explored by the agency, and why was this alternative chosen?

None

What are the consequences of not funding this package?

If the funding authority is not transferred between programs, then DSHS would be required to develop internal mechanisms to track and transfer costs resulting in reduced efficiency.

What is the relationship, if any, to the state's capital budget?

None

What changes would be required to existing statutes, rules, or contracts, in order to implement the change?

None

Expenditure and revenue calculations and assumptions

See attachment: AW M2-9T Transfers.xlsx.

Which costs and functions are one-time? Which are ongoing? What are the budget impacts in future biennia?

The transfer is one-time in Fiscal Year 2013. Some items are ongoing, but have been included in the 2013-15 Biennial Budget.

Department of Social and Health Services

DP Code/Title: M2-9T Transfers

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

<u>Object Detail</u>	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Overall Funding			
A Salaries And Wages	0	(261,000)	(261,000)
B Employee Benefits	0	(103,000)	(103,000)
E Goods And Services	0	(202,000)	(202,000)
T Intra-Agency Reimbursements	0	(21,000)	(21,000)
Total Objects	0	(587,000)	(587,000)

DSHS Source Code Detail

<u>Overall Funding</u>	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Fund 001-1, General Fund - Basic Account-State			
<u>Sources Title</u>			
0011 General Fund State	0	(389,000)	(389,000)
Total for Fund 001-1	0	(389,000)	(389,000)
Fund 001-C, General Fund - Basic Account-Medicaid Federal			
<u>Sources Title</u>			
19UL Title XIX Admin (50%)	0	(198,000)	(198,000)
Total for Fund 001-C	0	(198,000)	(198,000)
Total Overall Funding	0	(587,000)	(587,000)

**2013 Supplemental Budget
M2-9T Transfers**

	Program	FTEs			FY 2012			FY 2013			2011-13 Biennium		
		FY12	FY13	Total	001-1	Other	Total	001-1	Other	Total	001-1	Other	Total
010	Children's Administration			0.0			0			0	0	0	0
	1. ISSD Compensation Adjustments			0.0			0	(20,000)		(20,000)	(20,000)	0	(20,000)
	2. Central Service Reforms Redistribution			0.0			0	(593,000)	(185,000)	(778,000)	(593,000)	(185,000)	(778,000)
	3. Auditor & Cell Phone Funding			0.0			0	(12,000)	(12,000)	(24,000)	(12,000)	(12,000)	(24,000)
	4. Human Resource Consolidation		(13.0)	(6.5)			0	(462,000)	(410,000)	(872,000)	(462,000)	(410,000)	(872,000)
	5. Evidence Based Funding Transfer		1.0	0.5			0	57,000	53,000	110,000	57,000	53,000	110,000
				0.0			0			0	0	0	0
	010 Total	0.0	(12.0)	(6.0)	0	0	0	(1,030,000)	(554,000)	(1,584,000)	(1,030,000)	(554,000)	(1,584,000)
020	Juvenile Rehabilitation												
	1. ISSD Compensation Adjustments			0.0			0	(3,000)		(3,000)	(3,000)	0	(3,000)
	2. Central Service Reforms Redistribution			0.0			0	(20,000)		(20,000)	(20,000)	0	(20,000)
	3. Auditor & Cell Phone Funding			0.0			0	(7,000)		(7,000)	(7,000)	0	(7,000)
	4. Human Resource Consolidation			0.0			0	(3,000)		(3,000)	(3,000)	0	(3,000)
				0.0			0			0	0	0	0
	020 Total	0.0	0.0	0.0	0	0	0	(33,000)	0	(33,000)	(33,000)	0	(33,000)
030	Mental Health												
	1. ISSD Compensation Adjustments			0.0			0	(4,000)		(4,000)	(4,000)	0	(4,000)
	2. Central Service Reforms Redistribution			0.0			0	(72,000)	(21,000)	(93,000)	(72,000)	(21,000)	(93,000)
	3. Auditor & Cell Phone Funding			0.0			0	(13,000)	(13,000)	(26,000)	(13,000)	(13,000)	(26,000)
	4. Human Resource Consolidation		(5.0)	(2.5)			0	(242,000)	(128,000)	(370,000)	(242,000)	(128,000)	(370,000)
	5. Evidence Based Funding Transfer		1.0	0.5			0	56,000	52,000	108,000	56,000	52,000	108,000
				0.0			0			0	0	0	0
	030 Total	0.0	(4.0)	(2.0)	0	0	0	(275,000)	(110,000)	(385,000)	(275,000)	(110,000)	(385,000)
040	Division of Developmental Disabilities												
	1. ISSD Compensation Adjustments			0.0			0	(7,000)		(7,000)	(7,000)	0	(7,000)
	2. Central Service Reforms Redistribution			0.0			0	(133,000)	(40,000)	(173,000)	(133,000)	(40,000)	(173,000)
	3. Auditor & Cell Phone Funding			0.0			0	(15,000)	(15,000)	(30,000)	(15,000)	(15,000)	(30,000)
	4. Human Resource Consolidation		(6.0)	(3.0)			0	(234,000)	(143,000)	(377,000)	(234,000)	(143,000)	(377,000)
	8. Fair Hearing Coordinator		3.0	1.5			0			0	0	0	0
				0.0			0			0	0	0	0
	040 Total	0.0	(3.0)	(1.5)	0	0	0	(389,000)	(198,000)	(587,000)	(389,000)	(198,000)	(587,000)
050	Long Term Care												
	1. ISSD Compensation Adjustments			0.0			0	(13,000)		(13,000)	(13,000)	0	(13,000)
	2. Central Service Reforms Redistribution			0.0			0	(201,000)	(60,000)	(261,000)	(201,000)	(60,000)	(261,000)
	3. Auditor & Cell Phone Funding			0.0			0	(6,000)	(8,000)	(14,000)	(6,000)	(8,000)	(14,000)
	4. Human Resource Consolidation		(6.0)	(3.0)			0	(214,000)	(207,000)	(421,000)	(214,000)	(207,000)	(421,000)
	8. Fair Hearing Coordinator		(3.0)	(1.5)			0			0	0	0	0
				0.0			0			0	0	0	0
	050 Total	0.0	(9.0)	(4.5)	0	0	0	(434,000)	(275,000)	(709,000)	(434,000)	(275,000)	(709,000)
060	Economic Services Administration												
	1. ISSD Compensation Adjustments			0.0			0	(80,000)		(80,000)	(80,000)	0	(80,000)
	2. Central Service Reforms Redistribution			0.0			0	(1,579,000)	(500,000)	(2,079,000)	(1,579,000)	(500,000)	(2,079,000)
	3. Auditor & Cell Phone Funding			0.0			0	(17,000)	(25,000)	(42,000)	(17,000)	(25,000)	(42,000)
	4. Human Resource Consolidation		(38.5)	(19.3)			0	(1,303,000)	(1,179,000)	(2,482,000)	(1,303,000)	(1,179,000)	(2,482,000)
				0.0			0			0	0	0	0
	060 Total	0.0	(38.5)	(19.3)	0	0	0	(2,979,000)	(1,704,000)	(4,683,000)	(2,979,000)	(1,704,000)	(4,683,000)
070	Alcohol and Substance Abuse												
	1. ISSD Compensation Adjustments			0.0			0			0	0	0	0
	2. Central Service Reforms Redistribution			0.0			0	(20,000)	(6,000)	(26,000)	(20,000)	(6,000)	(26,000)
	3. Auditor & Cell Phone Funding			0.0			0	(1,000)		(1,000)	(1,000)		(1,000)
				0.0			0			0	0	0	0
	070 Total	0.0	0.0	0.0	0	0	0	(21,000)	(6,000)	(27,000)	(21,000)	(6,000)	(27,000)
100	Division of Voc. Rehabilitation												
	1. ISSD Compensation Adjustments			0.0			0	(2,000)		(2,000)	(2,000)	0	(2,000)
	2. Central Service Reforms Redistribution			0.0			0	(45,000)	(14,000)	(59,000)	(45,000)	(14,000)	(59,000)
	3. Auditor & Cell Phone Funding			0.0			0	(1,000)	(2,000)	(3,000)	(1,000)	(2,000)	(3,000)
	4. Human Resource Consolidation		(2.0)	(1.0)			0		(122,000)	(122,000)	0	(122,000)	(122,000)
				0.0			0			0	0	0	0
	100 Total	0.0	(2.0)	(1.0)	0	0	0	(48,000)	(138,000)	(186,000)	(48,000)	(138,000)	(186,000)
110	Administration & Supporting Services												
	1. ISSD Compensation Adjustments			0.0			0	130,000		130,000	130,000	0	130,000
	2. Central Service Reforms Redistribution			0.0			0	(96,000)	(34,000)	(130,000)	(96,000)	(34,000)	(130,000)
	3. Auditor & Cell Phone Funding			0.0			0	76,000	75,000	151,000	76,000	75,000	151,000
	4. Human Resource Consolidation		71.5	35.8			0	2,458,000	2,189,000	4,647,000	2,458,000	2,189,000	4,647,000
	5. Evidence Based Funding Transfer		(2.0)	(1.0)			0	(113,000)	(105,000)	(218,000)	(113,000)	(105,000)	(218,000)
	7. Cost Allocation Funding Adjustment			0.0			0	(500,000)	500,000	0	(500,000)	500,000	0
				0.0			0			0	0	0	0
	110 Total	0.0	69.5	34.8	0	0	0	1,955,000	2,625,000	4,580,000	1,955,000	2,625,000	4,580,000
135	Special Commitment Center												
	1. ISSD Compensation Adjustments			0.0			0	(1,000)		(1,000)	(1,000)	0	(1,000)
	2. Central Service Reforms Redistribution			0.0			0	(22,000)		(22,000)	(22,000)	0	(22,000)
	3. Auditor & Cell Phone Funding			0.0			0	(4,000)		(4,000)	(4,000)	0	(4,000)
	7. SCC and CFS FTE Transfer		(3.7)	(1.9)			0			0	0	0	0
				0.0			0			0	0	0	0
	135 Total	0.0	(3.7)	(1.9)	0	0	0	(27,000)	0	(27,000)	(27,000)	0	(27,000)
145	Payments to Other Agencies												
	2. Central Service Reforms Redistribution			0.0			0	2,781,000	860,000	3,641,000	2,781,000	860,000	3,641,000
	7. Cost Allocation Funding Adjustment			0.0			0	500,000	(500,000)	0	500,000	(500,000)	0
	145 Total	0.0	0.0	0.0	0	0	0	3,281,000	360,000	3,641,000	3,281,000	360,000	3,641,000

**2013 Supplemental Budget
M2-9T Transfers**

	Program	FTEs		
		FY12	FY13	Total
150	Information System Services Division			
	4. Human Resource Consolidation		(1.0)	(0.5)
				0.0
	145 Total	0.0	(1.0)	(0.5)
160	Consolidated Field Services			
	7. SCC and CFS FTE Transfer		3.7	1.9
				0.0
	150 Total	0.0	3.7	1.9

FY 2012		
001-1	Other	Total
		0
		0
0	0	0
		0
0	0	0

FY 2013		
001-1	Other	Total
		0
		0
0	0	0
		0
0	0	0

2011-13 Biennium		
001-1	Other	Total
0	0	0
0	0	0
0	0	0
0	0	0
0	0	0

Agency-Wide Total:	0	0	0.0
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0	0	0
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0	0	0
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0	0	0
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NOTES:

1. Information System Services Division (ISSD) compensation adjustments from Administration & Supporting Services (Admin).
2. Central Service Reforms savings distribution from Payment to Other Agencies (PTOA). Reduces objects E and G costs and includes ISSD's share, which reduces programs' TZ costs.
3. Internal Auditor & Cell Phone Funding - transfers funding for from programs to Admin. Admin's share of the funding is accounted in the transfer.
4. Human Resource Consolidation - transferring from programs to Admin.
5. Evidenced Based Funding Transfer from Admin to Children's Administration (CA) and Mental Health (MH). Funding intended for CA and MH not Admin.
6. Special Commitment Center (SCC) and Consolidated Field Services (CFS) FTE Transfer. SCC received funding for McNeil Island Maintenance Operations and resident legal services transferred to the Office of Public Defense. Dollars reside in SCC but FTE authority reside in CFS.
7. Cost Allocation Funding Adjustment between Admin and PTOA. Adjusts state and federal funding between programs to align with anticipated federal earnings.
8. Fair Hearing Coordinator - transfer FTEs from Program 050 to Program 040.

Department of Social and Health Services

DP Code/Title: M2-DA Utilization of Residential Services
Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Recommendation Summary Text:

The Department of Social and Health Services (DSHS), Division of Developmental Disabilities (DDD), requests a reduction of (\$960,000) Total Funds and a increase of \$223,000 GF-State in the 2013 Supplemental Budget for utilization of community residential services. Residential services provide instruction and support to people with developmental disabilities in a safe community setting.

Fiscal Detail:

Operating Expenditures

	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Overall Funding			
001-1 General Fund - Basic Account-State	0	223,000	223,000
001-C General Fund - Basic Account-Medicaid Federal	0	(1,183,000)	(1,183,000)
Total Cost	0	(960,000)	(960,000)

Staffing

Package Description:

DSHS, DDD requests a reduction of (\$960,000) Total Funds and a increase of \$230,000 GF-State in the 2013 Supplemental Budget for utilization of community residential services. Residential services provide instruction and support to people with developmental disabilities in a safe community setting. "Utilization" in this decision package covers changes in both caseload and per capita costs.

There has been an increase in the per capita costs due to:

- Change in the residential services case mix has shifted from lower cost to higher cost services. The only clients entering the program the past several years are those with the highest assessed acuity level and support needs due to budget restraints.
- The average client currently in the program has an assessed need for increased service hours determined by their mandatory annual assessment reviews. Once on the waiver, clients are entitled to these services.

Community residential services serve approximately 4,400 clients in DDD with services in the community as an alternative to institutionalization in a Residential Habilitation Center (RHC) for clients who meet Intermediate Care Facilities for the Intellectually Disabled (ICF/ID) eligibility.

The Fiscal Year 2012 average cost for ICF/ID services in an RHC is about \$500 per day per client. The average daily rate for community placements are \$220 for a supported living program and \$310 for a community protection supported living program.

Over 98 percent of residential clients receive services through federal Medicaid Home and Community Based Services (HCBS) Core and Community Protection waivers. The majority of clients are long term recipients of these services. New entries are limited by the state budget and approved on a case by case basis. The clients receiving residential services, 97 percent are adults and 81 percent receive Supported Living services.

Other community residential services for adults include Group Homes, Alternative Living, and Companion Homes.

For the approximately 150 children in ICF/ID, residential services include Child Supported Living offered in a licensed staffed residential home or in a foster care setting. These services enable clients to remain in the community rather than being placed in an institution at a higher daily rate.

Agency Contact: Dan Winkley (360) 902-8179

Department of Social and Health Services

DP Code/Title: M2-DA Utilization of Residential Services
Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Program Contact: Carla McKnight (360) 725-2430

Narrative Justification and Impact Statement

What specific performance outcomes does the agency expect?

The DDD Comprehensive Assessment has established a consistent way to determine the quantity of services a person needs and the division has implemented a standardized rate setting structure for residential services based upon the assessed needs of the individual with a developmental disability. The residential rates calculator includes an "economies of scale" calculation because when clients live together or near each other they can share staffing hours.

Performance Measure Detail

Agency Level

Activity: D087 Residential Program

No measures linked to package

Incremental Changes

FY 1

FY 2

0.00

0.00

Is this decision package essential to implement a strategy identified in the agency's strategic plan?

This request supports the following goals identified in the DSHS 2011-2013 Strategic Plan:

- Goal 1 Improve the health status of vulnerable populations
- Goal 3 Improve individual and public safety

Does this decision package provide essential support to one of the Governor's priorities?

This package supports the Governor's priority of strengthening Washington families by protecting and providing for those who can't care for themselves.

Does this decision package make key contributions to statewide results? Would it rate as a high priority in the Priorities of Government process?

This decision package rates as a high priority in the Priorities of Government (POG) process for the 2011-13 Budget development under the strategy:

Provide for the safety of Washington's vulnerable children and adults

- Provide community-based residential and in-home support services
- Provide support services to families

What are the other important connections or impacts related to this proposal?

None

What alternatives were explored by the agency, and why was this alternative chosen?

None

What are the consequences of not funding this package?

Most of the clients in community residential programs are on a Centers for Medicare and Medicaid Services (CMS) Home and Community Based Service Waiver that enables the state to capture federal matching dollars maximizing our state funding. CMS requires an annual assessment for all wavier clients and DDD must meet any assessed increases to the level of

Department of Social and Health Services

DP Code/Title: M2-DA Utilization of Residential Services

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

service. If DDD does not increase the service level to meet the assessed need, then the client's health and safety will be at risk. DDD would also lose the federal matching dollars necessary to operate the program.

DDD management has been successful in reducing residential service expenditures through several initiatives that are least likely to dramatically impact clients and providers (such as the economies of scale process, agency administrative reductions over the last two biennia, and a policy to reduce single person households).

What is the relationship, if any, to the state's capital budget?

None

What changes would be required to existing statutes, rules, or contracts, in order to implement the change?

None

Expenditure and revenue calculations and assumptions

See attachment: DDD M2-DA Utilization of Residential Services.xlsx

Which costs and functions are one-time? Which are ongoing? What are the budget impacts in future biennia?

All costs would be ongoing. Future biennia costs will be adjusted by future caseload and per capita estimates.

<u>Object Detail</u>		<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Overall Funding				
N	Grants, Benefits & Client Services	0	(960,000)	(960,000)
DSHS Source Code Detail				
Overall Funding		<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Fund 001-1, General Fund - Basic Account-State				
<u>Sources</u>	<u>Title</u>			
0011	General Fund State	0	223,000	223,000
<i>Total for Fund 001-1</i>		<u>0</u>	<u>223,000</u>	<u>223,000</u>
Fund 001-C, General Fund - Basic Account-Medicaid Federal				
<u>Sources</u>	<u>Title</u>			
19TA	Title XIX Assistance (FMAP)	0	(1,183,000)	(1,183,000)
<i>Total for Fund 001-C</i>		<u>0</u>	<u>(1,183,000)</u>	<u>(1,183,000)</u>
Total Overall Funding		<u>0</u>	<u>(960,000)</u>	<u>(960,000)</u>

2013 Supplemental Budget
M2 - DA Utilization of Residential Services

Change in:

Caseload	Expenditures			Per Capitas			Due to Caseload			Due to Cost/Utilization Changes			Expenditures			Total Change		
	Total	State	Federal	Total	State	Federal	Total	State	Federal	Total	State	Federal	Total	State	Federal	Total	State	Federal

Funding Available

Fiscal Year 2013 - Through Policy Level (includes 2012 Supplemental Budget)

H51 Residential Services 4,371 \$ 352,724,000 \$ 177,689,000 \$ 6,725 \$ 3,388

Funding Needed

Fiscal Year 2013

H51 Residential Services 4,359 \$ 351,764,000 \$ 177,912,000 \$ 6,725 \$ 3,401 (12) \$ (953,000) \$ (480,000) \$ (473,000) \$ (7,000) \$ 703,000 \$ (710,000) \$ (960,000) \$ 223,000 \$ (1,183,000)

2013 Supplemental Budget Step

\$ (953,000) \$ (480,000) \$ (473,000) \$ (7,000) \$ 703,000 \$ (710,000) \$ (960,000) \$ 223,000 \$ (1,183,000)

Department of Social and Health Services

DP Code/Title: M2-X9 Program Support Stabilization

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Recommendation Summary Text:

The Department of Social & Health Services (DSHS), Division of Developmental Disabilities (DDD), requests \$2,200,000 Total Funds, \$1,400,000 GF-State, in the 2013 Supplemental Budget to stabilize funding for DDD Program Support.

Fiscal Detail:

Operating Expenditures

	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040			
001-1 General Fund - Basic Account-State	0	1,400,000	1,400,000
001-C General Fund - Basic Account-Medicaid Federal	0	800,000	800,000
Total Cost	0	2,200,000	2,200,000

Staffing

Package Description:

DDD has an annual budget of approximately \$1 billion (in total funds) to serve more than 35,000 clients - with institutional services, community services, forecasted programs, and regional operations. This decision package assumes that a reasonable number of staff must be specifically dedicated to DDD operations. In Headquarters, during Fiscal Year 2012, DDD had roughly 25 FTEs and \$4.6 million (total funds) of expenditures compared to an allotment of just under \$2.1 million (total funds). Over the past 11 years, DDD headquarters has averaged an overspend of \$2.2 million dollars total funds, \$1.4 million GF-State, per year. This request is to increase headquarters appropriation by the historical average overspend.

Agency Contact: Dan Winkley (360) 902-8179

Program Contact: Carla McKnight (360) 725-2430

Narrative Justification and Impact Statement

What specific performance outcomes does the agency expect?

This decision package relates to the Aging and Disability Services Administration (ADSA) 2009-2013 Strategic Plan Goal 3 to maintain timely access to programs and responsiveness to changing needs, and manage risk through appropriate staffing.

It also supports the goal of continuing efforts to enhance quality of services. An objective within this goal is to support the development of an effective workforce.

Performance Measure Detail

Program: 040

Activity: D079 Program Support for Developmental Disabilities

No measures linked to package

Incremental Changes	
<u>FY 1</u>	<u>FY 2</u>
0.00	0.00

Is this decision package essential to implement a strategy identified in the agency's strategic plan?

This request supports the following goals identified in the DSHS 2011-2013 Strategic Plan:

--Goal 5 Increase public trust through strong management practices that ensure quality and leverage all resources

Does this decision package provide essential support to one of the Governor's priorities?

Department of Social and Health Services

DP Code/Title: M2-X9 Program Support Stabilization
Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

This package supports the Governor's priority of holding government accountable by focusing on performance and investing our resources to get the greatest possible return.

Does this decision package make key contributions to statewide results? Would it rate as a high priority in the Priorities of Government process?

This decision package rates as a high priority in the Priorities of Government (POG) process for the 2011-13 Budget development under the strategy:

State government must achieve results through efficient and effective performance
--Provide and support quality human resources for the work of government agencies
--Deliver the efficient use of financial resources to provide public services
--Provide objective data and information for the public and elected decision makers
--Provide efficient and effective logistical support to deliver services
--Ensure efficiency, performance, and accountability to the public

What are the other important connections or impacts related to this proposal?

None

What alternatives were explored by the agency, and why was this alternative chosen?

Alternatives to funding this request are either to remove the categorical appropriations from DDD or to authorize DSHS transfer authority through the appropriations bill.

What are the consequences of not funding this package?

DDD will be unable to maintain a sufficient infrastructure to maintain the day-to-day operations of a division serving 35,000 clients.

What is the relationship, if any, to the state's capital budget?

None

What changes would be required to existing statutes, rules, or contracts, in order to implement the change?

None

Expenditure and revenue calculations and assumptions

See attachment: DDD M2-X9 Program Support Stabilization.xlsx

Which costs and functions are one-time? Which are ongoing? What are the budget impacts in future biennia?

All costs would be ongoing and carry forward into future biennia.

Department of Social and Health Services

DP Code/Title: M2-X9 Program Support Stabilization
Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

<u>Object Detail</u>	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040 Objects			
A Salaries And Wages	0	539,000	539,000
B Employee Benefits	0	277,000	277,000
E Goods And Services	0	822,000	822,000
G Travel	0	47,000	47,000
J Capital Outlays	0	59,000	59,000
N Grants, Benefits & Client Services	0	70,000	70,000
P Debt Service	0	23,000	23,000
T Intra-Agency Reimbursements	0	363,000	363,000
Total Objects	0	2,200,000	2,200,000

DSHS Source Code Detail

Program 040	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Fund 001-1, General Fund - Basic Account-State			
<u>Sources Title</u>			
0011 General Fund State	0	1,400,000	1,400,000
Total for Fund 001-1	0	1,400,000	1,400,000
Fund 001-C, General Fund - Basic Account-Medicaid Federal			
<u>Sources Title</u>			
19UL Title XIX Admin (50%)	0	800,000	800,000
Total for Fund 001-C	0	800,000	800,000
Total Program 040	0	2,200,000	2,200,000

2013 Supplemental Budget M2-X9 Program Support

Historical Headquarter (H10) Expenditure Records						
Fiscal Year	GF-State		GF-Federal		Variance	
	Allotment	Expend	Allotment	Expend	State	Federal
2002	1,774,750	2,909,120	1,261,440	2,000,894	(1,134,370)	(739,454)
2003	3,161,555	3,503,134	2,155,627	2,362,906	(341,579)	(207,279)
2004	2,484,000	3,865,714	1,742,000	2,652,389	(1,381,714)	(910,389)
2005	3,274,500	4,413,521	2,485,800	3,319,683	(1,139,021)	(833,883)
2006	2,312,000	3,427,047	2,228,000	2,523,683	(1,115,047)	(295,683)
2007	1,916,000	3,959,588	1,827,000	2,381,830	(2,043,588)	(554,830)
2008	2,262,000	4,130,790	1,405,000	2,624,614	(1,868,790)	(1,219,614)
2009	1,903,000	3,798,131	1,383,000	2,458,103	(1,895,131)	(1,075,103)
2010	1,407,000	2,796,353	659,000	2,041,439	(1,389,353)	(1,382,439)
2011	1,341,000	2,752,667	1,158,000	1,636,550	(1,411,667)	(478,550)
2012 ³	1,382,000	2,753,549	686,000	1,411,337	(1,371,549)	(725,337)

Average Overspend Per Year (1,371,983) (765,687)
Rounded Average Overspend Per Year (1,400,000) (800,000)

2012 Expenditure Records ³		
Program Index	Allotment	Expend
Budgeted Projects ¹		249,250
DDD Suspende		4,044
DSHS Employee Recognition		361
Executive Projects ²		426,866
Human Resource Management System		225,777
Money Follow the Person		76,943
Program Support	2,068,000	2,514,332
Termination Leave		667,312

2011-13 Biennium		
Agency Shared Costs List includes:	DSHS	DDD's Share
Washington State Patrol	705,000	143,820
Employee Recognition	187,077	38,164
Drug Free Workplace	89,486	18,255
Housing Coordinator	198,644	40,523
Gov Comm on Disability Emp	173,400	35,374
Washington DC Office	200,000	40,800
Department-Wide Surveys	377,085	76,925
Client Registry	699,860	142,771
Executive Outreach	259,903	53,020
WA State Mentors	186,539	38,054
Emergency Mgmt Pgm Specialist	182,551	37,240

- 1) Budgeted Costs include the Agency Shared Cost List (formerly known as the Tax List).
- 2) Executive Projects includes the specific costs related to a contract with Research & Data Analysis (RDA), various system training, and roughly \$200,000 for the Microsoft Enterprise agreement.
- 3) Expenditure records for 2012 as of June 22, 2012.

Department of Social and Health Services

DP Code/Title: M2-XG SOLA Needs

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Recommendation Summary Text:

The Department of Social and Health Services (DSHS), Division of Developmental Disabilities (DDD), requests 17.3 FTEs and \$1,366,000 Total Funds, \$801,000 GF-State to create two new State Operated Living Alternative (SOLA) homes for young people, one in the Spokane area and another in the Yakima area.

Fiscal Detail:

Operating Expenditures

	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040			
001-1 General Fund - Basic Account-State	0	801,000	801,000
001-C General Fund - Basic Account-Medicaid Federal	0	565,000	565,000
Total Cost	0	1,366,000	1,366,000

Staffing

	<u>FY 1</u>	<u>FY 2</u>	<u>Annual Avg</u>
Program 040 FTEs	0.0	17.3	8.7

Package Description:

DSHS, DDD, requests 17.3 FTEs and \$1,366,000 Total Funds, \$801,000 GF-State to create two new State Operated Living Alternative (SOLA) homes for young people, one in the Spokane area and another in the Yakima area.

This package requests funding for the creation of two new SOLA homes for young people. There are currently a number of people with developmental disabilities in Residential Habilitation Centers (RHC) because suitable community options do not exist. These young people have not been permanently admitted because they could be served in community settings due to the nature of their behaviors. The remaining community option is a SOLA setting, which cannot reject clients based on their behaviors. There are currently no SOLA facilities licensed to care for children.

Chapter 30, Laws of 2011, reduces the state's number of RHCs, eliminates permanent admissions of people of any age to Yakima Valley school (YVS), and restricts RHC use for children under the age of 21. On July 1, 2012, provisions in this law went into effect, prohibiting the admission of children under the age of 16 to RHCs and limiting the admission of persons ages 16 through 20 to RHCs for short-term crisis and respite purposes only.

RHCs had been a placement option for young people with severe behavioral challenges. During the 2009-11 Biennium, more than 34 individuals under the age of 25 were placed in RHCs for long-term stays. With RHCs no longer being an option for these young individuals and YVS not an option for anyone, diverse services, including publicly and privately operated long-term stay options in the community are needed to meet this legislative direction.

SOLA programs, which provide 24/7 support using state employees, were created as a community alternative to the state's RHCs during the closure of Interlake School (RHC) in 1994. A number of residents and staff were transferred to SOLAs during that closure. The division currently provides services for 129 clients around the state through this option. When the Frances Haddon Morgan Center (FHMC) closed in 2011, a large number of families chose SOLAs for their family member's residential program rather than another RHC, or contracted agency supported living. Both state-run and privately-run programs offer safe and quality services. However, some families will only accept state run options. An out-of-state RHC placement would be more costly than a SOLA placement and would move the children far from their families and communities.

One area where SOLA programs are the best option is working with hard to serve people with extremely challenging behaviors who cannot be served by contracted supported living providers. The state has developed expertise in this area and can provide services to people private agencies are unable to serve. This becomes very important in finding homes for children who are also involved in the mental health system. There are fewer community options for children than adults and less expertise with these children in the

Department of Social and Health Services

DP Code/Title: M2-XG SOLA Needs

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

system over all, making SOLA a necessary tool in the system of care.

Agency Contact: Dan Winkley (360) 902-8179

Program Contact: Don Clintsman (360) 725-3421

Narrative Justification and Impact Statement

What specific performance outcomes does the agency expect?

Funding for this request will ensure that young clients served by the division will receive adequate support in the community to meet their residential living needs. It will help the department develop a robust system of care to meet people's needs throughout their continuum of care. This activity advances DDD's Government Management Accountability and Performance (GMAP) measure of serving a greater proportion of clients over time in the community and reducing reliance on the state's RHCs.

Performance Measure Detail

Program: 040

Activity: D095 State Operated Living Alternatives

No measures linked to package

Incremental Changes

FY 1

0.00

FY 2

0.00

Is this decision package essential to implement a strategy identified in the agency's strategic plan?

This request supports the following goals identified in the DSHS 2011-13 Strategic Plan:

- Goal 1 Improve the health status of vulnerable populations
- Goal 3 Improve individual and public safety

Does this decision package provide essential support to one of the Governor's priorities?

This package supports the Governor's priority of strengthening Washington families by protecting and providing for those who can't care for themselves.

Does this decision package make key contributions to statewide results? Would it rate as a high priority in the Priorities of Government process?

This decision package rates as a high priority in the Priorities of Government (POG) process for the 2011-13 Budget development under the strategies:

Provide for the safety of Washington's vulnerable children and adults

- Provide support services to families
- Provide community-based residential and in-home support services
- Provide support services to families

What are the other important connections or impacts related to this proposal?

SOLA programs are viewed as reliable and effective programs for serving people with developmental disabilities. Community advocates, RHC advocates and labor groups all support the creation and use of SOLAs.

What alternatives were explored by the agency, and why was this alternative chosen?

These SOLA homes will serve people who no longer have the ability to access an Intermediate Care Facility for People with

Department of Social and Health Services

DP Code/Title: M2-XG SOLA Needs

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Intellectual Disabilities (ICF/ID) services at an RHC. SOLAs will provide an appropriate programmatic alternative. Another alternative is to use a contracted community-supported living provider. However, the needs of the individuals identified in this package are such that most contracted residential providers cannot provide the appropriate set of services or settings. The stability and services of a program run by state employees offers the best option for these individuals to succeed in the community. If this option is unavailable to them, the next option would be to maintain the clients in an out-of-state RHC placement. An out-of-state RHC placement would be more costly than a SOLA placement and would move the children far from their families and communities.

What are the consequences of not funding this package?

Some children with extremely challenging behavior, who contracted agencies are unable to serve, will no longer have access to RHCs in the state of Washington. Their only option is to be served in an out-of-state ICF/ID at a significantly higher cost than community stabilization services in state.

What is the relationship, if any, to the state's capital budget?

None

What changes would be required to existing statutes, rules, or contracts, in order to implement the change?

None

Expenditure and revenue calculations and assumptions

See attachment: DDD M2-DR SOLA Needs.xlsx

Which costs and functions are one-time? Which are ongoing? What are the budget impacts in future biennia?

All costs would be ongoing and would carry forward into future biennia.

<u>Object Detail</u>	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040 Objects			
A Salaries And Wages	0	619,000	619,000
B Employee Benefits	0	360,000	360,000
E Goods And Services	0	272,000	272,000
G Travel	0	31,000	31,000
J Capital Outlays	0	66,000	66,000
T Intra-Agency Reimbursements	0	18,000	18,000
Total Objects	0	1,366,000	1,366,000

Department of Social and Health Services

DP Code/Title: M2-XG SOLA Needs

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

DSHS Source Code Detail

Program 040

FY 1

FY 2

Total

Fund 001-1, General Fund - Basic Account-State

Sources Title

0011 General Fund State

0

801,000

801,000

Total for Fund 001-1

0

801,000

801,000

Fund 001-C, General Fund - Basic Account-Medicaid Federal

Sources Title

19TA Title XIX Assistance (FMAP)

0

565,000

565,000

Total for Fund 001-C

0

565,000

565,000

Total Program 040

0

1,366,000

1,366,000

2013 Supplemental Budget M2-XG SOLA Needs

SUMMARY OF COSTS FOR SOLA NEEDS

	<u>FY 13</u>
Staffing (Spokane)	
FTE's	9.0
GF-State	336,000
Federal	<u>274,000</u>
Total	610,000
Staffing (Yakima)	
FTE's	8.3
GF-State	337,000
Federal	<u>276,000</u>
Total	613,000
Ongoing Housing Costs (Spokane)	
GF-State	23,000
Federal	<u>15,000</u>
Total	38,000
One Time Housing Costs (Spokane)	
GF-State	105,000
Federal	<u>-</u>
Total	105,000
Total Costs	
FTE's	17.3
GF-State	801,000
Federal	<u>565,000</u>
Total	1,366,000

Department of Social and Health Services

DP Code/Title: M2-XH Community Crisis Stabilization

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

Recommendation Summary Text:

The Department of Social and Health Services (DSHS), Division of Developmental Disabilities (DDD), requests 19.3 FTEs and \$1,785,000 Total Funds, \$1,132,000 GF State to operate two community crisis stabilization homes and a mobile statewide treatment team. These services are needed to implement ESSB 5459, passed in the 2011 Legislative Session, which restricts access for children under age 21 to state institutions. The purpose of these services is to provide time limited supports, not to exceed 180 days, to preserve, maintain and strengthen a child's ability to remain in the community with his or her family.

Fiscal Detail:

Operating Expenditures

	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040			
001-1 General Fund - Basic Account-State	0	1,132,000	1,132,000
001-C General Fund - Basic Account-Medicaid Federal	0	653,000	653,000
Total Cost	0	1,785,000	1,785,000

Staffing

	<u>FY 1</u>	<u>FY 2</u>	<u>Annual Avg</u>
Program 040 FTEs	0.0	19.3	9.7

Package Description:

DSHS, DDD, requests 19.3 FTEs and \$1,785,000 Total Funds, \$1,132,000 GF State to operate two community crisis stabilization homes and a mobile statewide treatment team. These services are needed to implement ESSB 5459, passed in the 2011 Legislative Session, which restricts access for children under age 21 to state institutions.

During the 2011 Legislative Session, ESSB 5459 was adopted. It reduced the number of Residential Habilitation Centers (RHCs) and restricted the use of RHCs for children under the age of 21. Effective July 1, 2012, provisions prohibit RHC admission of children under the age of 16 and admission of persons 16-20 years of age can be for short-term crisis and respite purposes only. The legislation also directed further development of community-based services.

The Community Crisis Stabilization Services (CCSS) program, identified in ESSB 5459, will be a part of the overall DSHS DDD system of care, expanding community-based services to preserve, maintain, and strengthen client's ability to reside in their own home in the community. The CCSS is time-limited, not to exceed 180-days-per-year. It will include stabilization services to keep an individual in the community through a crisis, or if necessary, to provide temporary facility-based services that will stabilize the individual and return them successfully to their home in the community.

While the community-based system of care proactively works to meet client needs before a crisis it is not uncommon for community caregivers or families with adolescents to experience additional challenges during this developmental stage and at the end of school. CCSS is designed specifically to respond to these challenges with stabilization services in the home, or in a crisis facility, with a supported return to the home after stabilization has occurred. It will be staffed 24/7 by professional state employees.

Keeping individuals in their homes is critical for the individual and family. Persons with intellectual and developmental disabilities are entitled to receive services in RHCs when they meet the Level of Care and require active treatment. When there is a service crisis for an RHC eligible community person, and sufficient community stabilization services are lacking, families currently must rely on placement in an RHC. This program will meet community crisis needs and avoid the disruption of an unnecessary placement in the RHC.

CCSS services will include service planning such as functional assessment, behavior support, nursing, environmental/sensory services, and habilitation services. Direct services such as nursing, psychological, behavioral, psychiatric, pharmacology, occupational and physical therapy, speech language pathology, diet and nutrition will also be provided as needed. Transition

Department of Social and Health Services

DP Code/Title: M2-XH Community Crisis Stabilization

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

planning and in-home support services will include Behavior Technicians who will model, train, and coach family and community support members with implementation of the community plan.

Agency Contact: Dan Winkley (360) 902-8179

Program Contact: Don Clintsman (360) 725-3421

Narrative Justification and Impact Statement

What specific performance outcomes does the agency expect?

Funding for this request will ensure that people who have an immediate need for crisis stabilization will be able to access these services within the community. This will reduce the need for people to access a more costly Intermediate Care Facility for People with Intellectual Disabilities (ICF/IDs) Level of Care for crisis services. This activity advances DDD's Government Management Accountability and Performance (GMAP) measure of serving a greater proportion of clients over time in the community, and reducing reliance on the state's RHCs.

Performance Measure Detail

Program: 040

Activity: D070 Other Community Programs

No measures linked to package

Incremental Changes	
<u>FY 1</u>	<u>FY 2</u>
0.00	0.00

Is this decision package essential to implement a strategy identified in the agency's strategic plan?

This request supports the following goals identified in the DSHS 2011-13 Strategic Plan:

- Goal 1 Improve the health status of vulnerable populations
- Goal 3 Improve individual and public safety

Does this decision package provide essential support to one of the Governor's priorities?

This package supports the Governor's priority of strengthening Washington families by protecting and providing for those who can't care for themselves.

Does this decision package make key contributions to statewide results? Would it rate as a high priority in the Priorities of Government process?

This decision package rates as a high priority in the Priorities of Government (POG) process for the 2011-13 Budget development under the strategy:

Provide for the safety of Washington's vulnerable children and adults

- Provide support services to families

What are the other important connections or impacts related to this proposal?

None

What alternatives were explored by the agency, and why was this alternative chosen?

The Crisis Stabilization Program was identified in ESSB 5459 and it was the intent of the Legislature that the department develop and implement this program.

Department of Social and Health Services

DP Code/Title: M2-XH Community Crisis Stabilization

Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

What are the consequences of not funding this package?

Having crisis services available for children is critical to keeping children in their communities and in the least restrictive setting. Since children under 16 years of age can not be admitted to RHCs in the state of Washington, those children who require a facility setting will have to be served in out-of-state ICF/IDs at a significantly higher cost than community stabilization services in state.

What is the relationship, if any, to the state's capital budget?

None

What changes would be required to existing statutes, rules, or contracts, in order to implement the change?

None

Expenditure and revenue calculations and assumptions

See attachment: DDD M2-XH Community Crisis Stabilization.xlsx

Please note that this request is smaller than the cost of the program, because savings from closing Frances Haddon Morgan Center will contribute to the costs of services.

Which costs and functions are one-time? Which are ongoing? What are the budget impacts in future biennia?

There are one time equipment purchases for staff, all other costs will be ongoing.

Object Detail		<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040 Objects				
A	Salaries And Wages	0	876,000	876,000
B	Employee Benefits	0	359,000	359,000
E	Goods And Services	0	301,000	301,000
G	Travel	0	67,000	67,000
J	Capital Outlays	0	28,000	28,000
N	Grants, Benefits & Client Services	0	133,000	133,000
T	Intra-Agency Reimbursements	0	21,000	21,000
Total Objects		0	1,785,000	1,785,000

Department of Social and Health Services

DP Code/Title: M2-XH Community Crisis Stabilization
Program Level - 040 Div of Developmental Disabilities

Budget Period: 2011-13 Version: D3 040 - 2011-13 Final 2013 Sup

DSHS Source Code Detail

Program 040

Fund 001-1, General Fund - Basic Account-State

Sources Title

0011 General Fund State

FY 1

FY 2

Total

0

1,132,000

1,132,000

Total for Fund 001-1

0

1,132,000

1,132,000

Fund 001-C, General Fund - Basic Account-Medicaid Federal

Sources Title

19TA Title XIX Assistance (FMAP)

0

653,000

653,000

Total for Fund 001-C

0

653,000

653,000

Total Program 040

0

1,785,000

1,785,000

2013 Supplemental Budget

M2-XH Community Crisis Stabilization

SUMMARY OF FY 13 COSTS FOR COMMUNITY CRISIS STABILIZATION SERVICES

3 bed children's home home

Staffing

FTE's	16.0
GF-State	692,000
Federal	461,000
Total	<u>1,153,000</u>

On-Going Housing Cost

GF-State	40,000
Federal	17,000
Total	<u>57,000</u>

One time Housing Cost

GF-State	105,000
Federal	-
Total	<u>105,000</u>

Speciality Providers

GF-State	93,000
Federal	40,000
Total	<u>133,000</u>

Treatment Team

FTE's	3.3
GF-State	202,000
Federal	135,000
Total	<u>337,000</u>

Total Cost

FTE's	19.3
GF-State	1,132,000
Federal	653,000
Total	<u>1,785,000</u>